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JC943-U.S. PTO

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PTO/SB/05 (4/98)

Approved for use through 09/30/2000. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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UTILITY PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))	Attorney Docket No.	26530.18
	First Inventor or Application Identifier	Daniel Burton
	Title	System and Method for Sharing File Via A User Internet File System
	Express Mail Label No.	EL417819563US

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.	ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231
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<p>1. <input checked="" type="checkbox"/> * Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)</p> <p>2. <input checked="" type="checkbox"/> Specification [Total Pages 13] (preferred arrangement set forth below)</p> <ul style="list-style-type: none">- Descriptive title of the invention- Cross References to Related Applications- Statement Regarding Fed sponsored R & D- Reference to Microfiche Appendix- Background of the invention- Brief Summary of the invention- Brief Description of the Drawings (if filed)- Detailed Description- Claim(s)- Abstract of the Disclosure <p>3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 4]</p> <p>4. Oath or Declaration [Total Pages 1]</p> <p>a. <input checked="" type="checkbox"/> Newly executed (original or copy)</p> <p>b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63(d)) (for continuation/divisional with Box 16 completed)</p> <p>i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).</p> <p>NOTE FOR ITEMS 1 & 13: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).</p>	<p>5. <input type="checkbox"/> Microfiche Computer Program (Appendix)</p> <p>6. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)</p> <p>a. <input type="checkbox"/> Computer Readable Copy</p> <p>b. <input type="checkbox"/> Paper Copy (identical to computer copy)</p> <p>c. <input type="checkbox"/> Statement verifying identity of above copies</p> <p>ACCOMPANYING APPLICATION PARTS</p> <p>7. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))</p> <p>8. <input type="checkbox"/> 37 C.F.R. § 3.73(b) Statement (when there is an assignee) <input type="checkbox"/> Power of Attorney</p> <p>9. <input type="checkbox"/> English Translation Document (if applicable)</p> <p>10. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations</p> <p>11. <input type="checkbox"/> Preliminary Amendment</p> <p>12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)</p> <p>13. <input type="checkbox"/> * Small Entity Statement(s) <input type="checkbox"/> Statement filed in prior application, Status still proper and desired (PTO/SB/09-12)</p> <p>14. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)</p> <p>15. <input checked="" type="checkbox"/> Other: <u>Express Mail Certificate</u></p>
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16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No. _____

Prior application information: Examiner _____

Group / Art Unit: _____

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

17. CORRESPONDENCE ADDRESS☐ Customer Number or Bar Code Label

(Insert Customer No. or Attach bar code label here)

or ☒ Correspondence address below

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Name (Print/Type)	David L. McCombs	Registration No. (Attorney/Agent)	32,271
Signature	<i>David L. McCombs</i>	Date	10-10-00

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

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FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$1402.00)

Complete if Known

Application Number
Filing Date
First Named Inventor Daniel Burton
Examiner Name
Group Art Unit
Attorney Docket No. 26530.18

METHOD OF PAYMENT

1. ☐ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number
Deposit Account Name

- ☐ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17
☐ Applicant claims small entity status. See 37 CFR 1.27

2. ☒ Payment Enclosed:

☒ Check ☐ Credit card ☐ Money Order ☐ Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity	Small Entity	Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
		101	710	201 355 Utility filing fee	710
		106	320	206 160 Design filing fee	
		107	490	207 245 Plant filing fee	
		108	710	208 355 Reissue filing fee	
		114	150	214 75 Provisional filing fee	
SUBTOTAL (1)					(\$) 710

2. EXTRA CLAIM FEES

Total Claims 34 -20** = 14 x Fee from below 18 = 252
Independent Claims 8 -3** = 5 x 80 = 400
Multiple Dependent
Fee Paid

Large Entity	Small Entity	Fee Code (\$)	Fee Code (\$)	Fee Description
		103	18	203 9 Claims in excess of 20
		102	80	202 40 Independent claims in excess of 3
		104	270	204 135 Multiple dependent claim, if not paid
		109	80	209 40 ** Reissue independent claims over original patent
		110	18	210 9 ** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$1362)

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
		105	130	205 65 Surcharge - late filing fee or oath	
		127	50	227 25 Surcharge - late provisional filing fee or cover sheet	
		139	130	139 130 Non-English specification	
		147	2,520	147 2,520 For filing a request for ex parte reexamination	
		112	920*	112 920* Requesting publication of SIR prior to Examiner action	
		113	1,840*	113 1,840* Requesting publication of SIR after Examiner action	
		115	110	215 55 Extension for reply within first month	
		116	390	216 195 Extension for reply within second month	
		117	890	217 445 Extension for reply within third month	
		118	1,390	218 695 Extension for reply within fourth month	
		128	1,890	228 945 Extension for reply within fifth month	
		119	310	219 155 Notice of Appeal	
		120	310	220 155 Filing a brief in support of an appeal	
		121	270	221 135 Request for oral hearing	
		138	1,510	138 1,510 Petition to institute a public use proceeding	
		140	110	240 55 Petition to revive - unavoidable	
		141	1,240	241 620 Petition to revive - unintentional	
		142	1,240	242 620 Utility issue fee (or reissue)	
		143	440	243 220 Design issue fee	
		144	600	244 300 Plant issue fee	
		122	130	122 130 Petitions to the Commissioner	
		123	50	123 50 Petitions related to provisional applications	
		126	240	126 240 Submission of Information Disclosure Stmt	
		581	40	581 40 Recording each patent assignment per property (times number of properties)	40
		146	710	246 355 Filing a submission after final rejection (37 CFR § 1.129(a))	
		149	710	249 355 For each additional invention to be examined (37 CFR § 1.129(b))	
		179	710	279 355 Request for Continued Examination (RCE)	
		169	900	169 900 Request for expedited examination of a design application	
Other fee (specify)					
Reduced by Basic Filing Fee Paid					
SUBTOTAL (3)					(\$) 40

SUBMITTED BY

Name (Print/Type) David L. McCombs Registration No. (Attorney/Agent) 32,271 Telephone 214 651-5533
Signature Date 10-10-00

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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